


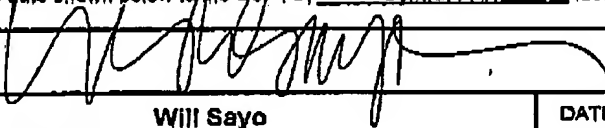
OCT 25 2006

Form CLS-IP21 (was 0906)
Approved for use through 3/31/2007

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	APPLICATION NUMBER	10/630,357	
	FILING DATE	7/30/2003	
	FIRST NAME INVENTOR	Sammy S. DATWANI et al.	
	ART UNIT	1743	
	EXAMINER	Maureen WALLENHORST	
TOTAL NUMBER OF PAGES IN THIS SUBMISSION	2	ATTORNEY DOCKET NUMBER	100/17201

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee(s) Due: \$ _____ <input type="checkbox"/> Fee Transmittal <input type="checkbox"/> Charge fee(s) required herefor to Deposit Account No. 03-0177 <input checked="" type="checkbox"/> Charge any deficiencies of fee(s) to Deposit Account No. 03-0177 <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input checked="" type="checkbox"/> Election/Restriction Requirement <input type="checkbox"/> After Final <input type="checkbox"/> Missing Parts/incomplete Application <input type="checkbox"/> Under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Extension of Time Request (___ month(s)) <input type="checkbox"/> Information Disclosure Statement & Form(s) PTO-SB08	<input type="checkbox"/> PTO-1595 Recordation Form Cover <input type="checkbox"/> Assignment (___ sheet(s)) <input type="checkbox"/> Merger/Name Change Certificate <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Statement Under 37 CFR 3.73(b) <input type="checkbox"/> Change of Address <input type="checkbox"/> Petition <input type="checkbox"/> Revive Application <input type="checkbox"/> Withdraw <input type="checkbox"/> Request <input type="checkbox"/> Correction <input type="checkbox"/> Refund	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Notice of Appeal <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other enclosure(s) identified below:
REMARKS		
The Commissioner is hereby authorized to charge any fee(s) found to be required for this filing, or credit any overpayment(s), to Deposit Account No. 03-0177, referencing the attorney docket number indicated above.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
FIRM NAME	CALIPER LIFE SCIENCES, INC.		
SIGNATURE			
PRINTED NAME	Ann C. Petersen		
DATE	10/25/2006	REG. NO.	55,536

CERTIFICATE OF TRANSMISSION/MAILING UNDER 37 CFR 1.8			
I hereby certify that this correspondence is being:			
<input type="checkbox"/> Deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop <u>Amendment</u> , Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.			
<input checked="" type="checkbox"/> Transmitted by facsimile on the date shown below to the USPTO, <u>Central FAX</u> , facsimile number <u>1-571-273-8300</u> .			
SIGNATURE			
PRINTED NAME	Will Sayo	DATE	10/25/2006

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OCT 25 2006

Application No.: 10/630,357
Applicant(s): Sammy S. DATWANI et al.
Filing Date: 7/30/2003
Art Unit: 1743
Examiner: Maureen Wallenhorst

Confirmation No.: 9263

Attorney Docket No.: 100/17201
Customer No.: 021569
Title: High Density Reagent Array Preparation Methods

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT

Sir:

In response to the Restriction Requirement mailed October 10, 2006, Applicants respectfully elect without traverse to prosecute claims in Group III (claims 75-102).

Applicants believe the present application is in condition for early examination, and action toward that end is respectfully requested. If the Examiner believes a telephone interview would expedite examination of this application, the Examiner is requested to contact the undersigned at the telephone number provided below.

The Commissioner is hereby authorized to charge the total of any fee due in this matter to Deposit Account No. 03-0177, referencing the docket number indicated above.

Respectfully submitted,

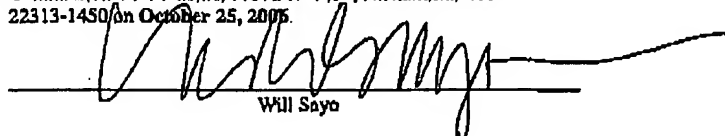


Ann C. Petersen
Reg. No. 55,536

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CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service as First Class Mail in an envelope addressed to: M/S Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on October 25, 2006.


Will Sayo